

**TDMS No.** 96019 - 05  
**Test Type:** CHRONIC  
**Route:** DOSED WATER  
**Species/Strain:** RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)  
**CAS Number:** 5589-96-8  
**Pathologist:** GILES, H. - HEATH, J. - Blackshear, P.

**Date Report Reqstd:** 03/28/2006  
**Time Report Reqstd:** 15:00:22  
**First Dose M/F:** 09/26/01 / 09/26/01  
**Lab:** SRI

F1\_R2

**C Number:** C96019

**Lock Date:** 07/14/2004

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** 25021 TSAC                                  25020 NATD                                  25019 MSAC

**Removal Date Range:** ALL

**Treatment Groups:** Include ALL

Note: Animals arranged according to days on test.

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DAY ON TEST	3	5	5	5	5	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7	7	7	
	3	0	2	2	8	0	0	0	1	3	3	4	6	7	9	0	0	1	2	2	2	2	2	2	
	7	4	5	5	6	1	8	9	4	1	7	7	8	9	2	1	3	5	6	9	9	9	9	9	
<b>FISCHER 344 RATS MALE</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
ANIMAL ID <b>0 MG/L</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	1	3	1	3	4	1	2	0	5	1	4	4	3	5	4	3	6	2	1	1	2	2	2	3	4
	7	6	0	1	8	2	1	7	9	1	6	0	7	5	9	4	1	6	4	3	2	3	5	5	7

males  
(cont...)

## ALIMENTARY SYSTEM

Esophagus

+ +

Intestine Large, Cecum

+ + + + + + + A +

Intestine Large, Colon

+ +

Intestine Large, Rectum

+ +

Intestine Small, Duodenum

+ +

Intestine Small, Ileum

+ +

Intestine Small, Jejunum

+ + + + + + + A A +

Liver

+ +

Hepatocellular Adenoma

Mesentery

+ + +

Pancreas

+ +

Aacinus, Adenoma

X

Salivary Glands

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

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| DAY ON TEST                  | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                              | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>0 MG/L</b>                | 1 | 3 | 1 | 3 | 4 | 1 | 2 | 0 | 5 | 1 | 4 | 4 | 3 | 5 | 4 | 3 | 6 | 2 | 1 | 1 | 2 | 2 | 2 | 3 | 4 |   |
|                              | 7 | 6 | 0 | 1 | 8 | 2 | 1 | 7 | 9 | 1 | 6 | 0 | 7 | 5 | 9 | 4 | 1 | 6 | 4 | 3 | 2 | 3 | 5 | 5 | 7 |   |

males  
(cont...)

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

**CARDIOVASCULAR SYSTEM**

Heart

+ +

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ +

Adrenal Medulla

+ +

Pheochromocytoma Benign

X X

Pheochromocytoma Malignant

Bilateral, Pheochromocytoma Benign

Islets, Pancreatic

+ +

Adenoma

X X

Carcinoma

Parathyroid Gland

+ +

Pituitary Gland

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

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| DAY ON TEST                  | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |   |
|                              | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 |   |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>0 MG/L</b>                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                              | 1 | 3 | 1 | 3 | 4 | 1 | 2 | 0 | 5 | 1 | 4 | 4 | 3 | 5 | 4 | 3 | 6 | 2 | 1 | 1 | 2 | 2 | 2 | 3 | 4 |
|                              | 7 | 6 | 0 | 1 | 8 | 2 | 1 | 7 | 9 | 1 | 6 | 0 | 7 | 5 | 9 | 4 | 1 | 6 | 4 | 3 | 2 | 3 | 5 | 5 | 7 |

**males  
(cont...)**

Pars Distalis, Adenoma X

Thyroid Gland + X X

C-cell, Adenoma

C-cell, Carcinoma

Follicular Cell, Adenoma

Follicular Cell, Carcinoma

**GENERAL BODY SYSTEM**

Tissue NOS

**GENITAL SYSTEM**

Epididymis +

Preputial Gland +

Adenoma

Carcinoma X

Prostate +

Seminal Vesicle +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

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|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                  | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                              | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                              | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 | 9 |
| <b>FISCHER 344 RATS MALE</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| ANIMAL ID                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <b>0 MG/L</b>                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <b>males<br/>(cont...)</b>   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Bilateral, Interstitial Cell, Adenoma |   |   |   |   | X | X | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |  |
| Interstitial Cell, Adenoma            |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X |   | X |   |   |  |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Lymph Node             | + |   |   |   | + |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Lymph Node, Mandibular | M | M | M | + | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |   |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Thymus                 | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

**INTEGUMENTARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Fibroadenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Skin            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Keratoacanthoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

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| DAY ON TEST           | 3 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID             | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 | 9 |
| 0 MG/L                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 1 | 3 | 1 | 3 | 4 | 1 | 2 | 0 | 5 | 1 | 4 | 4 | 3 | 5 | 4 | 3 | 6 | 2 | 1 | 1 | 2 | 2 | 2 | 3 | 4 |
|                       | 7 | 6 | 0 | 1 | 8 | 2 | 1 | 7 | 9 | 1 | 6 | 0 | 7 | 5 | 9 | 4 | 1 | 6 | 4 | 3 | 2 | 3 | 5 | 5 | 7 |

males  
(cont...)

|   |   |   |
|---|---|---|
| Squamous Cell Papilloma                 | X | X |
| Trichoepithelioma                       |   | X |
| Subcutaneous Tissue, Fibroma            | X |   |
| Subcutaneous Tissue, Fibrosarcoma       |   | X |
| Subcutaneous Tissue, Liposarcoma        |   |   |
| Subcutaneous Tissue, Neural Crest Tumor | X |   |

**MUSCULOSKELETAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Skeletal Muscle |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Peripheral Nerve |   |   |   |   |   |   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord      |   |   |   |   |   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
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|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| ANIMAL ID             | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 | 9 |
| 0 MG/L                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 1 | 3 | 1 | 3 | 4 | 1 | 2 | 0 | 5 | 1 | 4 | 4 | 3 | 5 | 4 | 3 | 6 | 2 | 1 | 1 | 2 | 2 | 2 | 3 | 4 |
|                       | 7 | 6 | 0 | 1 | 8 | 2 | 1 | 7 | 9 | 1 | 6 | 0 | 7 | 5 | 9 | 4 | 1 | 6 | 4 | 3 | 2 | 3 | 5 | 5 | 7 |

males  
(cont...)

Lung +

Alveolar/Bronchiolar Adenoma

Alveolar/Bronchiolar Carcinoma

Carcinoma, Metastatic, Thyroid Gland

Nose +

Trachea +

**SPECIAL SENSES SYSTEM**

Eye +

Harderian Gland +

Zymbal's Gland +

Carcinoma X

**URINARY SYSTEM**

Kidney +

Urinary Bladder +

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+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

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|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 3 | 0 | 2 | 2 | 8 | 0 | 0 | 0 | 1 | 3 | 3 | 4 | 6 | 7 | 9 | 0 | 0 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |   |
|                              | 7 | 4 | 5 | 5 | 6 | 1 | 8 | 9 | 4 | 1 | 7 | 7 | 8 | 9 | 2 | 1 | 3 | 5 | 6 | 9 | 9 | 9 | 9 | 9 |   |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>0 MG/L</b>                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|                              | 1 | 3 | 1 | 3 | 4 | 1 | 2 | 0 | 5 | 1 | 4 | 4 | 3 | 5 | 4 | 3 | 6 | 2 | 1 | 1 | 2 | 2 | 2 | 3 | 4 |
|                              | 7 | 6 | 0 | 1 | 8 | 2 | 1 | 7 | 9 | 1 | 6 | 0 | 7 | 5 | 9 | 4 | 1 | 6 | 4 | 3 | 2 | 3 | 5 | 5 | 7 |

males  
(cont...)

## SYSTEMIC LESIONS

Multiple Organ

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| X |   | X | X | X | X |   | X | X |   | X | X |   | X | X | X | X |   | X |   |   |   |   |   | X |

Leukemia Mononuclear

Mesothelioma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

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|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                              | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                              | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |   |
| <b>0 MG/L</b>                | 5 | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6        |   |
|                              | 2 | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3 | * TOTALS |   |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hepatocellular Adenoma    | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Acinus, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                     | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
| FISCHER 344 RATS MALE<br>0 MG/L | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |
| ANIMAL ID                       | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        |
|                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
|                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
|                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
|                                 | 5 | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6        |
|                                 | 2 | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3 | * TOTALS |

Stomach, Forestomach

+ 50

Stomach, Glandular

+ 50

## CARDIOVASCULAR SYSTEM

Heart

+ 50

## ENDOCRINE SYSTEM

Adrenal Cortex

+ 50

Adrenal Medulla

+ 50

Pheochromocytoma Benign

X 8

Pheochromocytoma Malignant

X

Bilateral, Pheochromocytoma Benign

X

Islets, Pancreatic

+ 50

Adenoma

X

Carcinoma

X X

Parathyroid Gland

+ + + M + + + + + + + + + + + + + M M + + M + + + + + 44

Pituitary Gland

+ 48

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                              | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                              | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |   |
| <b>0 MG/L</b>                | 5 | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6 | 6        |   |
|                              | 2 | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3 | * TOTALS |   |

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Pars Distalis, Adenoma | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 23 |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Thyroid Gland              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| C-cell, Adenoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| C-cell, Carcinoma          | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Follicular Cell, Adenoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Follicular Cell, Carcinoma | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**GENERAL BODY SYSTEM**

|            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Tissue NOS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | 1 |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|

**GENITAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Epididymis      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma         | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Prostate        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Date Report Reqsted: 03/28/2006

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |           |                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|-----------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| <b>FISCHER 344 RATS MALE</b><br><b>0 MG/L</b> | ANIMAL ID | 7               | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7  |
|   |           | 2               | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3  |
|   |           | 9               | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  |
|   |           | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |
|   |           | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |
|   |           | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |
|   |           | 5               | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6  |
|   |           | 2               | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3  |
|   |           | <b>* TOTALS</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
| Testes  |           | +               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Bilateral, Interstitial Cell, Adenoma         |           | X               | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 38 |
| Interstitial Cell, Adenoma                    |           |                 |   |   |   | X |   |   |   |   |   | X |   | X |   | X |   | X |   | X |   | X |   | X |   | 8  |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Lymph Node             | + | + |   |   | + | + |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |    | 14 |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 1  |    |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |

**INTEGUMENTARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Mammary Gland   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Fibroadenoma    | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Skin            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Keratoacanthoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

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Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS MALE</b><br><b>0 MG/L</b> | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   |           | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   |           | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

**\* TOTALS**

|   |  |   |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|---|---|---|---|---|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Squamous Cell Papilloma                 |  | X |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Trichoepithelioma                       |  |   | X |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Subcutaneous Tissue, Fibroma            |  | X |   |   |   |   |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Subcutaneous Tissue, Fibrosarcoma       |  |   |   | X | X | X | X |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Subcutaneous Tissue, Liposarcoma        |  |   |   |   |   | X |   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Subcutaneous Tissue, Neural Crest Tumor |  |   |   |   |   |   |   | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**MUSCULOSKELETAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |

**RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|
|                              | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 |
|                              | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |   |
| <b>0 MG/L</b>                | 5 | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6               | 6 |   |
|                              | 2 | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3 | * <b>TOTALS</b> |   |   |

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 2  |   |
| Alveolar/Bronchiolar Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 1 |
| Carcinoma, Metastatic, Thyroid Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Nose                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Trachea                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                       | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |
| DAY ON TEST           | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                       | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| 0 MG/L                | 5 | 6 | 6 | 6 | 0 | 0 | 0 | 0 | 1 | 2 | 2 | 3 | 3 | 5 | 0 | 1 | 2 | 4 | 4 | 4 | 4 | 4 | 5 | 6 | 6 | 6        | 6 |
|                       | 2 | 4 | 5 | 6 | 1 | 2 | 3 | 8 | 6 | 8 | 9 | 2 | 8 | 6 | 4 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 8 | 2 | 3 | * TOTALS |   |

## SYSTEMIC LESIONS

Multiple Organ

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| X | X |   |   |   |   |   | X | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 21 |

Leukemia Mononuclear

Mesothelioma Malignant

1

1

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 0 | 2 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 9 | 0 | 1 | 1 | 2 | 2 |   |
|                              | 4 | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 | 7 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 250 MG/L                     | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 |
|                              | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 3 | 6 | 6 |
|                              | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 | 7 | 8 |

males  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

+ +

Intestine Large, Cecum

+ + + + + A + + A +

Intestine Large, Colon

+ + + + + A +

Adenoma

Intestine Large, Rectum

+ +

Adenoma

Intestine Small, Duodenum

+ + + + + + + + A +

Intestine Small, Ileum

+ + + + A A + + A +

Intestine Small, Jejunum

+ + + + A + + + A +

Liver

+ +

Fibrosarcoma, Metastatic, Spleen

X

Mesentery

+ +

Fibrosarcoma

X X

Fibrosarcoma, Metastatic, Spleen

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                         | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |  |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
|                                     | 0 | 2 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 7 | 1 | 1 | 2 | 2 |  |
|                                     | 4 | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 |  |
| <b>FISCHER 344 RATS MALE</b>        | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| <b>ANIMAL ID</b>                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| <b>250 MG/L</b>                     | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |  |
|                                     | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 6 |  |
|                                     | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 |  |
|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pancreas                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Fibrosarcoma, Metastatic, Mesentery |   |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibrosarcoma, Metastatic, Spleen    |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| .....                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Salivary Glands                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| .....                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Stomach, Forestomach                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| .....                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Stomach, Glandular                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| .....                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Tongue                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Squamous Cell Papilloma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**CARDIOVASCULAR SYSTEM**

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

**ENDOCRINE SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Adrenal Cortex             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| .....                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Adrenal Medulla            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Pheochromocytoma Benign    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X | X |   |   |   | X |  |
| Pheochromocytoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |  |
| .....                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 0 | 2 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 7 | 1 | 1 | 2 | 2 |
|                              | 4 | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>              | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |
|                              | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 3 |
|                              | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 |
|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Islets, Pancreatic           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |
| Carcinoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Parathyroid Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + |
| Pituitary Gland              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pars Distalis, Adenoma       | X | X |   |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |   |   |   |
| Thyroid Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| C-cell, Adenoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |
| C-cell, Carcinoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Follicular Cell, Adenoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**GENERAL BODY SYSTEM**

|            |   |   |
|------------|---|---|
| Peritoneum | + | + |
|------------|---|---|

**GENITAL SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Epididymis                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Fibrosarcoma, Metastatic, Mesentery |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Preputial Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0                     | 2 | 4 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 9 | 0 | 0 | 1 | 1 | 2 |
| 4                     | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 | 7 | 9 |
| .....                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 250 MG/L              | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |
|                       | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 3 | 6 |
|                       | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 | 7 |
|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**males  
(cont...)**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adenoma                               | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrosarcoma, Metastatic, Spleen      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Bilateral, Interstitial Cell, Adenoma |   | X | X | X |   | X | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |
| Interstitial Cell, Adenoma            |   |   |   |   |   | X | X |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**HEMATOPOIETIC SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mandibular           | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrosarcoma, Metastatic, Spleen |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spleen                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrosarcoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 0 | 2 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 9 | 0 | 1 | 1 | 2 | 2 |   |
|                              | 4 | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 | 7 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>              | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 |
|                              | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 3 | 6 | 6 |
|                              | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 | 7 | 8 |

**males  
(cont...)**

Thymus

+ +

**INTEGUMENTARY SYSTEM**

Mammary Gland

+ X X

Fibroadenoma

Skin

+ +

Basal Cell Adenoma

X X

Squamous Cell Papilloma

Squamous Cell Papilloma, Multiple

X X

Subcutaneous Tissue, Fibroma

X X X

Subcutaneous Tissue, Fibrosarcoma

X X

Subcutaneous Tissue, Lipoma

**MUSCULOSKELETAL SYSTEM**

Bone

+ +

Skeletal Muscle

+ +

Fibrosarcoma, Metastatic, Mesentery

X X

+

Fibrosarcoma, Metastatic, Spleen

X X

Hemangioma

X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0                     | 2 | 4 | 4 | 4 | 5 | 7 | 9 | 0 | 0 | 1 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 7 | 9 | 0 | 0 | 1 | 1 | 2 |
| 4                     | 5 | 0 | 9 | 5 | 6 | 6 | 9 | 9 | 8 | 8 | 1 | 7 | 6 | 8 | 8 | 1 | 9 | 4 | 2 | 3 | 3 | 3 | 7 | 9 |
| .....                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 250 MG/L              | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |
|                       | 2 | 9 | 8 | 0 | 9 | 9 | 8 | 9 | 1 | 8 | 1 | 7 | 9 | 0 | 7 | 9 | 8 | 1 | 1 | 3 | 3 | 0 | 3 | 6 |
|                       | 8 | 8 | 9 | 0 | 1 | 9 | 8 | 5 | 9 | 0 | 8 | 1 | 0 | 9 | 2 | 7 | 3 | 3 | 5 | 1 | 2 | 8 | 0 | 7 |
|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

males  
(cont...)**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Peripheral Nerve | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord      | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**RESPIRATORY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Nose                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Trachea                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 5     | 5     | 5     | 5     | 5     | 5     | 5     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 7     | 7     | 7     | 7     | 7     | 7     |
|------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| 0                            | 2     | 4     | 4     | 4     | 5     | 7     | 9     | 0     | 0     | 1     | 1     | 3     | 3     | 6     | 6     | 6     | 7     | 7     | 9     | 0     | 0     | 1     | 1     | 2     |
| 4                            | 5     | 0     | 9     | 5     | 6     | 6     | 9     | 9     | 8     | 8     | 1     | 7     | 6     | 8     | 8     | 1     | 9     | 4     | 2     | 3     | 3     | 3     | 7     | 9     |
| .....                        | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| <b>FISCHER 344 RATS MALE</b> | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |
| ANIMAL ID                    | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |
| <b>250 MG/L</b>              | 1     | 0     | 0     | 1     | 0     | 0     | 0     | 0     | 1     | 0     | 1     | 0     | 0     | 1     | 0     | 0     | 0     | 1     | 1     | 1     | 1     | 1     | 0     | 0     |
|                              | 2     | 9     | 8     | 0     | 9     | 9     | 8     | 9     | 1     | 8     | 1     | 7     | 9     | 0     | 7     | 9     | 8     | 1     | 1     | 3     | 3     | 0     | 3     | 6     |
|                              | 8     | 8     | 9     | 0     | 1     | 9     | 8     | 5     | 9     | 0     | 8     | 1     | 0     | 9     | 2     | 7     | 3     | 3     | 5     | 1     | 2     | 8     | 0     | 7     |
|                              |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |

**males  
(cont...)**

Carcinoma

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Leukemia Mononuclear   |   |   |   |   | X |   |   | X | X | X |   | X | X | X | X |   |   |   |   | X | X | X | X | X |
| Mesothelioma Malignant |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| 250 MG/L              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1        |
|                       | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9 | 1 |   |   |   |          |
|                       | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0 |   |   |   | * TOTALS |

## ALIMENTARY SYSTEM

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|---|
| Esophagus                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Intestine Large, Cecum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 48 |   |
| Intestine Large, Colon           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |   |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    |    | 1 |
| Intestine Large, Rectum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    |    | 1 |
| Intestine Small, Duodenum        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |   |
| Intestine Small, Ileum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 46 |   |
| Intestine Small, Jejunum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 46 |   |
| Liver                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Fibrosarcoma, Metastatic, Spleen |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Mesentery                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 16 |   |
| Fibrosarcoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 2 |
| Fibrosarcoma, Metastatic, Spleen |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                         | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7  |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|----|---|
|                                     | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3  | 3 |
|                                     | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9               | 9  | 9 |
| <b>FISCHER 344 RATS MALE</b>        | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  |   |
| <b>ANIMAL ID</b>                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  |   |
| <b>250 MG/L</b>                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 1  |   |
|                                     | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9 | 1 |                 |    |   |
|                                     | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0 | * <b>TOTALS</b> |    |   |
| Pancreas                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |   |
| Fibrosarcoma, Metastatic, Mesentery |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 2  |   |
| Fibrosarcoma, Metastatic, Spleen    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |   |
| Salivary Glands                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |   |
| Stomach, Forestomach                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |   |
| Stomach, Glandular                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50              |    |   |
| Tongue                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |   |
| Squamous Cell Papilloma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | X  |   |

**CARDIOVASCULAR SYSTEM**

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**ENDOCRINE SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Adrenal Cortex             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Adrenal Medulla            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Pheochromocytoma Benign    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 13 |
| Pheochromocytoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| FISCHER 344 RATS MALE<br>250 MG/L | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7  | 7        |
|-----------------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----------|
|                                   |           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3  | 3        |
|                                   |           | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9  | 9        |
|                                   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0        |
|                                   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0        |
|                                   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0  | 1        |
|                                   |           | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9  | 1        |
|                                   |           | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0  | * TOTALS |
| Islets, Pancreatic                |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |
| Adenoma                           |           |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4        |
| Carcinoma                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2        |
| Parathyroid Gland                 |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | +  | 48       |
| Pituitary Gland                   |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |
| Pars Distalis, Adenoma            |           | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 30 |          |
| Thyroid Gland                     |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |
| C-cell, Adenoma                   |           |   |   |   |   |   |   |   |   |   | X |   | X | X |   |   |   |   |   |   |   |   |   |   |   | X  | 7        |
| C-cell, Carcinoma                 |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1        |
| Follicular Cell, Adenoma          |           |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |    | 2        |

## GENERAL BODY SYSTEM

|            |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Peritoneum | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 4 |
|------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

## GENITAL SYSTEM

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Epididymis                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Fibrosarcoma, Metastatic, Mesentery |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Preputial Gland                     | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7  | 7        |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----------|---|
|                                       | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3  | 3        | 3 |
|                                       | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1  | 1        | 1 |
| <b>FISCHER 344 RATS MALE</b>          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0        |   |
| ANIMAL ID                             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 0        |   |
| <b>250 MG/L</b>                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  | 1        |   |
|                                       | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9 | 1 |   |    |          |   |
|                                       | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0 |    | * TOTALS |   |
| Adenoma                               | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 7        |   |
| Carcinoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1        |   |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |   |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |   |
| Fibrosarcoma, Metastatic, Spleen      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1        |   |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50       |   |
| Bilateral, Interstitial Cell, Adenoma | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 39 |          |   |
| Interstitial Cell, Adenoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 7        |   |

**HEMATOPOIETIC SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone Marrow                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymph Node                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 31 |   |
| Lymph Node, Mandibular           | M | M | M | M | M | M | + | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 3  |   |
| Lymph Node, Mesenteric           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Fibrosarcoma, Metastatic, Spleen |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Spleen                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Fibrosarcoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS MALE</b><br><b>250 MG/L</b> | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   |           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   |           | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

**\* TOTALS**

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Thymus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**INTEGUMENTARY SYSTEM**

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |   |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|---|---|
| Mammary Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |   |
| Fibroadenoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    | 4 |   |   |
| Skin                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |   |
| Basal Cell Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | X | 1 |   |
| Squamous Cell Papilloma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    |   | 4 |   |
| Squamous Cell Papilloma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 1 |   |
| Subcutaneous Tissue, Fibroma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 7 |   |
| Subcutaneous Tissue, Fibrosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 3 |   |
| Subcutaneous Tissue, Lipoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | X | 1 |

**MUSCULOSKELETAL SYSTEM**

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|---|
| Bone                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |   |
| Skeletal Muscle                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 4 |
| Fibrosarcoma, Metastatic, Mesentery |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 2 |
| Fibrosarcoma, Metastatic, Spleen    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1 |
| Hemangioma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

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Species/Strain: RATS/F 344

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|---|---|---|---|
|                              | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7             | 7 | 7 | 7 |   |
|                              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3             | 3 | 3 | 3 | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1             | 1 | 1 | 1 | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 | 0 | 0 | 1 |
|                              | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9 | 1 |   |               |   |   |   |   |
|                              | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0 | * | <b>TOTALS</b> |   |   |   |   |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | 5  |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | 5  |

**RESPIRATORY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1 |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>250 MG/L</b>              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1               |   |
|                              | 7 | 7 | 7 | 8 | 8 | 8 | 9 | 0 | 0 | 1 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 8 | 9 | 1 |   |                 |   |
|                              | 6 | 7 | 9 | 5 | 6 | 7 | 2 | 1 | 3 | 7 | 2 | 1 | 2 | 6 | 0 | 4 | 5 | 6 | 7 | 0 | 3 | 4 | 2 | 4 | 0 | <b>* TOTALS</b> |   |

|           |   |   |
|-----------|---|---|
| Carcinoma | X | 1 |
|-----------|---|---|

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| <hr/>           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |

**SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |           |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |           |
| Leukemia Mononuclear   | X | X | X | X |   |   | X | X |   |   |   | X | X |   |   |   |   |   |   |   |   | X | X |   |           | <b>23</b> |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | X |   | <b>5</b>  |           |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|                              | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |
|                              | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |
| <b>FISCHER 344 RATS MALE</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 500 MG/L                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 |
|                              | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 |

males  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

+ +

Intestine Large, Cecum

+ + + + + + + + + + A + + + + + + + + + + + + + + + A +

Intestine Large, Colon

+ +

Intestine Large, Rectum

+ +

Intestine Small, Duodenum

+ +

Intestine Small, Ileum

+ + + + + + + + + + A + + + + + + + + + + + + + + + + A +

Intestine Small, Jejunum

+ A +

Liver

+ +

Hepatocellular Adenoma

.....

Mesentery

+ +

Oral Mucosa

+

Pharyngeal, Squamous Cell Papilloma

X

Pancreas

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                       | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |   |
| DAY ON TEST           | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |   |
|                       | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |   |
|                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |
| 500 MG/L              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 | 7 |
|                       | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 | 0 |

males  
(cont...)

Acinus, Adenoma

Salivary Glands

+ +

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

## CARDIOVASCULAR SYSTEM

Blood Vessel

.....

Heart

+ +

## ENDOCRINE SYSTEM

Adrenal Cortex

+ +

Adenoma

.....

Adrenal Medulla

+ +

Pheochromocytoma Benign

X X

X

X X

Pheochromocytoma Malignant

X

Bilateral, Pheochromocytoma Benign

.....

Islets, Pancreatic

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |
|                              | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 |
|                              | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 |

males  
(cont...)

Adenoma

Carcinoma

Parathyroid Gland

X X X

Pituitary Gland

+ + + + + + + + + + M + + + + M + + + + + M + + + + +

Pars Distalis, Adenoma

X X X X X X X X X X X X X X X

Pars Distalis, Carcinoma

Thyroid Gland

+ +

C-cell, Adenoma

X X

Follicular Cell, Adenoma

Follicular Cell, Carcinoma

**GENERAL BODY SYSTEM**

Peritoneum

+ +

**GENITAL SYSTEM**

Epididymis

+ +

Preputial Gland

+ +

Adenoma

X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 7 | 9 | 0 | 1 | 2 |
|             | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|             | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 |
|             | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 |

**FISCHER 344 RATS MALE**  
**500 MG/L** males  
(cont...)

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Bilateral, Interstitial Cell, Adenoma | X | X | X | X | X | X |   |   |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |
| Interstitial Cell, Adenoma            | X |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |
|                              | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 | 7 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 | 7 |
|                              | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 | 0 |

males  
(cont...)

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Mammary Gland                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Fibroadenoma                            |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| <hr/>                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Skin                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Basal Cell Adenoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X |   |  |
| Keratoacanthoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X |   |  |
| Squamous Cell Papilloma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |  |
| Subcutaneous Tissue, Fibroma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |  |
| Subcutaneous Tissue, Neural Crest Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |  |

**MUSCULOSKELETAL SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Osteosarcoma |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**NERVOUS SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Astrocytoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <hr/>                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Oligodendrogloma Malignant |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Peripheral Nerve           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |
|                              | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 4 | 6 | 7 |
|                              | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 |

males  
(cont...)

Spinal Cord

+

## RESPIRATORY SYSTEM

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## SPECIAL SENSES SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Zymbal's Gland  | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenoma         | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

## URINARY SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 2 | 6 | 5 | 7 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | 3 | 4 | 5 | 6 | 7 | 7 | 9 | 0 | 1 | 2 | 2 |
|                              | 1 | 6 | 0 | 9 | 9 | 5 | 1 | 5 | 1 | 6 | 7 | 9 | 9 | 1 | 6 | 2 | 7 | 4 | 9 | 9 | 6 | 4 | 7 | 7 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                              | 5 | 7 | 7 | 9 | 9 | 4 | 3 | 5 | 9 | 6 | 5 | 4 | 5 | 4 | 8 | 6 | 6 | 7 | 5 | 6 | 6 | 6 | 4 | 6 |
|                              | 5 | 5 | 7 | 0 | 4 | 7 | 9 | 1 | 5 | 8 | 8 | 9 | 0 | 3 | 8 | 7 | 3 | 8 | 7 | 1 | 0 | 6 | 2 | 5 |

males  
(cont...)

## SYSTEMIC LESIONS

Multiple Organ

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| X |   | X | X | X | X | X | X |   |   |   |   |   |   |   |   | X | X | X | X | X | X | X | X |  |

Leukemia Mononuclear

Mesothelioma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                              | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>500 MG/L</b>              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
|                              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               |   |
|                              | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9 | 9               |   |
|                              | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * <b>TOTALS</b> |   |

## ALIMENTARY SYSTEM

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Esophagus                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Cecum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |    |
| Intestine Large, Colon              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Large, Rectum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Small, Duodenum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Intestine Small, Ileum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |    |
| Intestine Small, Jejunum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 46 |    |
| Liver                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Hepatocellular Adenoma              |   |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   |   | X |   |   |   | 3  |    |
| Mesentery                           | + | + |   |   | + |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 15 |
| Oral Mucosa                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Pharyngeal, Squamous Cell Papilloma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Pancreas                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                              | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>500 MG/L</b>              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
|                              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               |   |
|                              | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9               |   |
|                              | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * <b>TOTALS</b> |   |

|                      |   |    |
|----------------------|---|----|
| Acinus, Adenoma      | X | 1  |
| Salivary Glands      | + | 50 |
| Stomach, Forestomach | + | 50 |
| Stomach, Glandular   | + | 50 |

**CARDIOVASCULAR SYSTEM**

|              |   |    |
|--------------|---|----|
| Blood Vessel | + | 1  |
| Heart        | + | 50 |

**ENDOCRINE SYSTEM**

|                                    |   |    |
|------------------------------------|---|----|
| Adrenal Cortex                     | + | 50 |
| Adenoma                            | X | 1  |
| Adrenal Medulla                    | + | 50 |
| Pheochromocytoma Benign            | X | 7  |
| Pheochromocytoma Malignant         |   | 1  |
| Bilateral, Pheochromocytoma Benign | X | 1  |
| Islets, Pancreatic                 | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7  |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|----|---|
|                              | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3  | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1  | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  |   |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1  |   |
|                              | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9 | 9               | 9  |   |
|                              | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * <b>TOTALS</b> |    |   |
| Adenoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 9  |   |
| Carcinoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |   |
| Parathyroid Gland            | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | M | + | + | + | + | + | +               | 45 |   |
| Pituitary Gland              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |   |
| Pars Distalis, Adenoma       | X | X | X | X | X | X | X | X |   |   |   |   |   |   |   |   |   |   |   | X | X | X | X | X | X |                 | 23 |   |
| Pars Distalis, Carcinoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |   |
| Thyroid Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |   |
| C-cell, Adenoma              | X |   | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |                 | 7  |   |
| Follicular Cell, Adenoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |   |
| Follicular Cell, Carcinoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |                 | 1  |   |

**GENERAL BODY SYSTEM**

|            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Peritoneum |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 2 |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

**GENITAL SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma         | X |   |   |   |   | X |   |   |   |   | X |   |   |   |   |   | X | X |   |   |   |   |   |   |   | 7  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|---|---|
|                              | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7             | 7 | 7 |
| DAY ON TEST                  | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3             | 3 | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1             | 1 | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 | 0 |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 | 0 |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1             | 1 | 1 |
|                              | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9 | 9             | 9 | 9 |
|                              | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * | <b>TOTALS</b> |   |   |

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Bilateral, Interstitial Cell, Adenoma | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 39 |    |
| Interstitial Cell, Adenoma            |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 5  |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Lymph Node             | + | + |   |   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 19 |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |    |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |

**INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                             | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|
|   | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 |
|   | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 | 1 |
| <b>FISCHER 344 RATS MALE</b>            | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |   |
| <b>ANIMAL ID</b>                        | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |   |
| <b>500 MG/L</b>                         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |   |
|   | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9               | 9 |   |
|   | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * <b>TOTALS</b> |   |   |
| Mammary Gland                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50              |   |   |
| Fibroadenoma                            |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |                 | 3 |   |
| Skin                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50              |   |   |
| Basal Cell Adenoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 2 |   |
| Keratoacanthoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 2 |   |
| Squamous Cell Papilloma                 |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |                 | 4 |   |
| Subcutaneous Tissue, Fibroma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |                 | 2 |   |
| Subcutaneous Tissue, Neural Crest Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1 |   |

**MUSCULOSKELETAL SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**NERVOUS SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Astrocytoma Malignant      |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Oligodendrogloma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Peripheral Nerve           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                              | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                              | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>500 MG/L</b>              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               |   |
|                              | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9 | 9               |   |
|                              | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 | * <b>TOTALS</b> |   |
| Spinal Cord                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3               |   |

**RESPIRATORY SYSTEM**

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                       | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |   |
| DAY ON TEST           | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                       | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| 500 MG/L              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
|                       | 4 | 4 | 8 | 8 | 9 | 3 | 3 | 3 | 4 | 4 | 7 | 7 | 8 | 8 | 8 | 9 | 3 | 3 | 5 | 6 | 6 | 7 | 7 | 7 | 9 |   |          |   |
|                       | 0 | 8 | 4 | 5 | 6 | 6 | 7 | 8 | 5 | 6 | 6 | 9 | 1 | 2 | 7 | 3 | 3 | 4 | 2 | 4 | 9 | 2 | 3 | 4 | 1 |   | * TOTALS |   |

## SYSTEMIC LESIONS

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Leukemia Mononuclear   | X |   |   |   | X | X |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 19 |
| Mesothelioma Malignant |   | X |   |   |   |   | X |   |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   |   |   |    | 10 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

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Lab: SRI

|                              |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |
|------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
|                              | 3     | 3     | 4     | 4     | 5     | 5     | 5     | 5     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 6     | 7     | 7     | 7     | 7     | 7     | 7     |       |
|                              | 5     | 8     | 3     | 6     | 1     | 2     | 5     | 8     | 3     | 3     | 3     | 3     | 5     | 6     | 7     | 8     | 8     | 8     | 9     | 1     | 2     | 2     | 2     | 2     |
|                              | 7     | 0     | 4     | 8     | 0     | 1     | 6     | 8     | 0     | 1     | 1     | 9     | 2     | 7     | 4     | 2     | 2     | 7     | 9     | 7     | 7     | 9     | 9     | 9     |
| .....                        | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| <b>FISCHER 344 RATS MALE</b> | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |
| ANIMAL ID                    | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     | 0     |
| <b>1000 MG/L</b>             | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     | 2     |
|                              | 6     | 5     | 5     | 0     | 1     | 5     | 0     | 0     | 3     | 4     | 5     | 5     | 1     | 4     | 0     | 1     | 2     | 3     | 4     | 6     | 3     | 0     | 1     | 2     |
|                              | 3     | 6     | 4     | 3     | 5     | 0     | 0     | 5     | 2     | 1     | 3     | 1     | 7     | 7     | 8     | 1     | 3     | 1     | 8     | 2     | 7     | 9     | 0     | 0     |

males  
(cont...)

## ALIMENTARY SYSTEM

Esophagus

+ +

Intestine Large, Cecum

+ + + + + + + + A +

Intestine Large, Colon

+ + + + + + + + A +

Adenoma

X

Intestine Large, Rectum

+ + + + + + + + A +

Adenoma

X

Intestine Small, Duodenum

+ + + + + + + + A +

Intestine Small, Ileum

+ + + + + + + + A +

Intestine Small, Jejunum

+ + + + + + + + A +

Liver

+ +

Hepatocellular Adenoma

X X

Hepatocellular Adenoma, Multiple

X

Mesentery

+ +

Oral Mucosa

+

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST           | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE | 5 | 8 | 3 | 6 | 1 | 2 | 5 | 8 | 3 | 3 | 3 | 5 | 6 | 7 | 8 | 8 | 9 | 1 | 2 | 2 | 2 |
| ANIMAL ID             | 7 | 0 | 4 | 8 | 0 | 1 | 6 | 8 | 0 | 1 | 1 | 9 | 2 | 7 | 4 | 2 | 2 | 7 | 9 | 9 | 9 |
| 1000 MG/L             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                       | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                       | 6 | 5 | 5 | 0 | 1 | 5 | 0 | 0 | 3 | 4 | 5 | 5 | 1 | 4 | 0 | 1 | 2 | 3 | 4 | 6 | 3 |
|                       | 3 | 6 | 4 | 3 | 5 | 0 | 0 | 5 | 2 | 1 | 3 | 1 | 7 | 7 | 8 | 1 | 3 | 1 | 8 | 2 | 7 |

males  
(cont...)

Squamous Cell Papilloma

X

Pancreas

+ +

Aacinus, Adenoma

Salivary Glands

+ +

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

Tongue

.....

Tooth

+ +

## CARDIOVASCULAR SYSTEM

Blood Vessel

..... +

Heart

+ +

Alveolar/Bronchiolar Carcinoma,  
Metastatic, Lung

X

Schwannoma Benign

X

## ENDOCRINE SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS MALE</b><br><b>1000 MG/L</b> | <b>ANIMAL ID</b> | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |                  | 3           | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 |
|  |                  | 5           | 8 | 3 | 6 | 1 | 2 | 5 | 8 | 3 | 3 | 3 | 5 | 6 | 7 | 8 | 8 | 8 | 9 | 1 | 2 |
|  |                  | 7           | 0 | 4 | 8 | 0 | 1 | 6 | 8 | 0 | 1 | 1 | 9 | 2 | 7 | 4 | 2 | 2 | 7 | 9 | 7 |
|  |                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

males  
(cont...)

Adrenal Cortex

+ +

Adrenal Medulla

+ +

Pheochromocytoma Benign

X X

Pheochromocytoma Malignant

X

Bilateral, Pheochromocytoma Benign

Islets, Pancreatic

+ +

Adenoma

X

Carcinoma

X

Parathyroid Gland

+ + + + + + + + + + + + M + + + + M + + + + + + + +

Pituitary Gland

+ +

Pars Distalis, Adenoma

X

X

X

X

X

X

X

Thyroid Gland

+ +

C-cell, Adenoma

X

Follicular Cell, Adenoma

X

**GENERAL BODY SYSTEM**

Peritoneum

+ +

+

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST           | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1000 MG/L             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                       | 6 | 5 | 5 | 0 | 1 | 5 | 0 | 0 | 3 | 4 | 5 | 5 | 1 | 4 | 0 | 1 | 2 | 3 | 4 | 6 | 3 | 0 | 1 |
|                       | 3 | 6 | 4 | 3 | 5 | 0 | 0 | 5 | 2 | 1 | 3 | 1 | 7 | 7 | 8 | 1 | 3 | 1 | 8 | 2 | 7 | 9 | 0 |
|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

males  
(cont...)

## GENITAL SYSTEM

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Preputial Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + |
| Adenoma                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X | X | X |   |   |   |   |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Bilateral, Interstitial Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X | X | X | X | X | X | X |
| Interstitial Cell, Adenoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X | X | X | X | X | X | X |

## HEMATOPOIETIC SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node  | + | + |   | + | + |   | + | + | + |   | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mediastinal, Alveolar/Bronchiolar Carcinoma, Metastatic, Lung |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular  | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 5 | 8 | 3 | 6 | 1 | 2 | 5 | 8 | 3 | 3 | 3 | 3 | 5 | 6 | 7 | 8 | 8 | 9 | 1 | 2 | 2 | 2 | 2 |
|                              | 7 | 0 | 4 | 8 | 0 | 1 | 6 | 8 | 0 | 1 | 1 | 9 | 2 | 7 | 4 | 2 | 2 | 7 | 9 | 7 | 7 | 9 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>1000 MG/L</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                    | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                              | 6 | 5 | 5 | 0 | 1 | 5 | 0 | 0 | 3 | 4 | 5 | 5 | 1 | 4 | 0 | 1 | 2 | 3 | 4 | 6 | 3 | 0 | 1 |
|                              | 3 | 6 | 4 | 3 | 5 | 0 | 0 | 5 | 2 | 1 | 3 | 1 | 7 | 7 | 8 | 1 | 3 | 1 | 8 | 2 | 7 | 9 | 0 |

**males  
(cont...)**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lymph Node, Mesenteric                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| <hr/>   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spleen  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| <hr/>   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Hemangiosarcoma                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |  |
| <hr/>   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Thymus  | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + |  |
| Alveolar/Bronchiolar Carcinoma,<br>Metastatic, Lung |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Thymoma Malignant                                   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**INTEGUMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Mammary Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Fibroadenoma                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |  |
| <hr/>                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Skin                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Basal Cell Adenoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |  |
| Keratoacanthoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |  |
| Squamous Cell Papilloma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |  |
| Sebaceous Gland, Adenoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |  |
| Subcutaneous Tissue, Fibroma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |  |
| Subcutaneous Tissue, Neural Crest<br>Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                              | 5 | 8 | 3 | 6 | 1 | 2 | 5 | 8 | 3 | 3 | 3 | 5 | 6 | 7 | 8 | 8 | 9 | 1 | 2 | 2 | 2 | 2 | 2 |
|                              | 7 | 0 | 4 | 8 | 0 | 1 | 6 | 8 | 0 | 1 | 1 | 9 | 2 | 7 | 4 | 2 | 2 | 7 | 9 | 7 | 7 | 9 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>1000 MG/L</b>             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |
|                              | 6 | 5 | 5 | 0 | 1 | 5 | 0 | 0 | 3 | 4 | 5 | 5 | 1 | 4 | 0 | 1 | 2 | 3 | 4 | 6 | 3 | 0 |   |
|                              | 3 | 6 | 4 | 3 | 5 | 0 | 0 | 5 | 2 | 1 | 3 | 1 | 7 | 7 | 8 | 1 | 3 | 1 | 8 | 2 | 7 | 9 | 0 |

males  
(cont...)**MUSCULOSKELETAL SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymoma Malignant, Metastatic, Thymus               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |  |
| Skeletal Muscle                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |  |
| Alveolar/Bronchiolar Carcinoma,<br>Metastatic, Lung |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |  |

**NERVOUS SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Oligodendrogloma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |  |
| Peripheral Nerve           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |  |
| Spinal Cord                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |  |

**RESPIRATORY SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |  |
| Alveolar/Bronchiolar Carcinoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |
| Thymoma Malignant, Metastatic, Thymus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

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Lab: SRI

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                  | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|                              | 5 | 8 | 3 | 6 | 1 | 2 | 5 | 8 | 3 | 3 | 3 | 3 | 5 | 6 | 7 | 8 | 8 | 8 | 9 | 1 | 2 | 2 | 2 | 2 |
|                              | 7 | 0 | 4 | 8 | 0 | 1 | 6 | 8 | 0 | 1 | 1 | 9 | 2 | 7 | 4 | 2 | 2 | 7 | 9 | 7 | 7 | 9 | 9 | 9 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>1000 MG/L</b>             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                              | 6 | 5 | 5 | 0 | 1 | 5 | 0 | 0 | 3 | 4 | 5 | 5 | 1 | 4 | 0 | 1 | 2 | 3 | 4 | 6 | 3 | 0 | 1 | 2 |
|                              | 3 | 6 | 4 | 3 | 5 | 0 | 0 | 5 | 2 | 1 | 3 | 1 | 7 | 7 | 8 | 1 | 3 | 1 | 8 | 2 | 7 | 9 | 0 | 0 |

**males  
(cont...)**

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**URINARY SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Renal Tubule, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Urinary Bladder       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + |

**SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| .....                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Leukemia Mononuclear   |   | X |   |   |   | X |   | X |   | X | X | X | X |   |   |   |   | X | X | X | X |   |   |  |
| .....                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS MALE</b><br><b>1000 MG/L</b> | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|  |           | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|  |           | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |

**\* TOTALS****ALIMENTARY SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |    |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|
| Esophagus                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Intestine Large, Cecum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |    |
| Intestine Large, Colon           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |    |
| Adenoma                          |   |   |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3  |    |
| Intestine Large, Rectum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |    |    |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1  |
| Intestine Small, Duodenum        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |    |
| Intestine Small, Ileum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |    |
| Intestine Small, Jejunum         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 48 |    |
| Liver                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Hepatocellular Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 3  |
| Hepatocellular Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1  |
| Mesentery                        | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 15 |
| Oral Mucosa                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                    |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS MALE<br>1000 MG/L | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                                    |           | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                    |           | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

Squamous Cell Papilloma 1

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Pancreas             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Acinus, Adenoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |    | 1 |
| Salivary Glands      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Tongue               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Tooth                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |

**CARDIOVASCULAR SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|---|
| Blood Vessel  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | + | 2 |
| Heart   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |   |
| Alveolar/Bronchiolar Carcinoma,<br>Metastatic, Lung |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 1 |
| Schwannoma Benign                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   | 1 |

**ENDOCRINE SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                              | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                              | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |
| <b>1000 MG/L</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |
|                              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2               | 2 |
|                              | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5               | 6 |
|                              | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * <b>TOTALS</b> |   |

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Adrenal Cortex                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adrenal Medulla                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Pheochromocytoma Benign            | X |   | X |   | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   | X | X | X |   | X |   | 11 |   |
| Pheochromocytoma Malignant         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Bilateral, Pheochromocytoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    | 1 |
| Islets, Pancreatic                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma                            | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Parathyroid Gland                  | + | + | + | + | + | M | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | M | + | + | M | 44 |   |
| Pituitary Gland                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Pars Distalis, Adenoma             | X |   | X | X | X |   | X |   |   | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 21 |   |
| Thyroid Gland                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| C-cell, Adenoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 8 |
| Follicular Cell, Adenoma           | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |

**GENERAL BODY SYSTEM**

|            |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Peritoneum |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3 |
|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                              | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |
|                              | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                              | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| <b>1000 MG/L</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|                              | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        | 2 |
|                              | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5 | 6 | 6        | 6 |
|                              | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * TOTALS |   |

**GENITAL SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Epididymis                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Preputial Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 49 |
| Adenoma                               |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   | X | X |   |   |   |   |   |   |    | 8  |
| Prostate                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Seminal Vesicle                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Testes                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Bilateral, Interstitial Cell, Adenoma | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 43 |    |
| Interstitial Cell, Adenoma            |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3  |

**HEMATOPOIETIC SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Lymph Node   | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 25 |
| Mediastinal, Alveolar/Bronchiolar<br>Carcinoma, Metastatic, Lung |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Lymph Node, Mandibular   | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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TDMS No. 96019 - 05

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Lab: SRI

| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7  | 7  |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|----|----|---|
|   | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3  | 3  | 3 |
|   | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1               | 1  | 1  | 1 |
| <b>FISCHER 344 RATS MALE</b>                        | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  | 0  |   |
| <b>ANIMAL ID</b>                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0  | 0  |   |
| <b>1000 MG/L</b>                                    | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2               | 2  | 2  |   |
|   | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5 | 6 | 6               | 6  | 6  |   |
|   | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * <b>TOTALS</b> |    |    |   |
| Lymph Node, Mesenteric                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | +  | 50 |   |
| Spleen  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 50 |    |   |
| Hemangiosarcoma                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |    |   |
| Thymus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +               | 48 |    |   |
| Alveolar/Bronchiolar Carcinoma,<br>Metastatic, Lung |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |    |   |
| Thymoma Malignant                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 | 1  |    |   |

**INTEGUMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Mammary Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Fibroadenoma                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   | X |   |   |   |    | 4  |
| Skin                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Basal Cell Adenoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 1  |
| Keratoacanthoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Squamous Cell Papilloma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Sebaceous Gland, Adenoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Subcutaneous Tissue, Fibroma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 4  |
| Subcutaneous Tissue, Neural Crest<br>Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                              | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|                              | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        | 1 |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| ANIMAL ID                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
| <b>1000 MG/L</b>             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        | 2 |
|                              | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5 | 6 | 6 | 6        | 6 |
|                              | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * TOTALS |   |

**MUSCULOSKELETAL SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Thymoma Malignant, Metastatic, Thymus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

|   |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   |   |
|---|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|---|---|
| Skeletal Muscle                                     | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | 1 |   |
| Alveolar/Bronchiolar Carcinoma,<br>Metastatic, Lung |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |   | 1 |

**NERVOUS SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|---|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |   |
| Oligodendrogloma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1 |

|                  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Peripheral Nerve | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | 4 |
|------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|

|             |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|-------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Spinal Cord | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + | 4 |
|-------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|

**RESPIRATORY SYSTEM**

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Alveolar/Bronchiolar Carcinoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Thymoma Malignant, Metastatic, Thymus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |  |
|--|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|--|
| <b>FISCHER 344 RATS MALE</b><br><b>1000 MG/L</b> | ANIMAL ID | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |  |
|  |           | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |  |
|  |           | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        |  |
| .....  |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |  |
| .....  |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |  |
| .....  |           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        |  |
| .....  |           | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5 | 6 | 6 | 6        |  |
| .....  |           | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * TOTALS |  |

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**URINARY SYSTEM**

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Renal Tubule, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |

**SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear   | X | X |   |   |   |   |   | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 21 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |          |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                              | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |
|                              | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1        |
| <b>FISCHER 344 RATS MALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| <b>ANIMAL ID</b>             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| <b>1000 MG/L</b>             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2        |
|                              | 2 | 5 | 0 | 1 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 5 | 9 | 2 | 3 | 3 | 3 | 4 | 5 | 6 | 6 | 6        |
|                              | 4 | 2 | 2 | 4 | 6 | 8 | 6 | 7 | 3 | 5 | 6 | 2 | 3 | 4 | 5 | 7 | 9 | 9 | 0 | 8 | 9 | 0 | 9 | 0 | 1 | * TOTALS |

\*\*\* END OF MALE DATA \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

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TDMS No. 96019 - 05

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Lab: SRI

| DAY ON TEST                    | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>0 MG/L</b>                  | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                                | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 8 | 8 |
|                                | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 | 5 |

females  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

+ +

Intestine Large, Cecum

+ + + + + + + A + + + + + + A + + + + + + + + + + + + +

Intestine Large, Colon

+ +

Intestine Large, Rectum

+ +

Intestine Small, Duodenum

A +

Intestine Small, Ileum

A + + + + + + A + + + + + + A + + + + + + + + + + + +

Intestine Small, Jejunum

A + + + + + + A + + + + + + A + + + + + + + + + + + +

Leiomyosarcoma

X

Liver

+ +

Mesentery

+ +

Oral Mucosa

+

Carcinoma, Metastatic, Thyroid Gland

X

Pharyngeal, Squamous Cell Papilloma

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

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Species/Strain: RATS/F 344

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Lab: SRI

| DAY ON TEST   | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>0 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|   | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 8 |
|   | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Tongue  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma, Metastatic, Thyroid Gland                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**CARDIOVASCULAR SYSTEM**

|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Schwannoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**ENDOCRINE SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adrenal Medulla            | + | + | + | + |   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pheochromocytoma Benign    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pheochromocytoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Islets, Pancreatic         | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| DAY ON TEST                    | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>0 MG/L</b>                  | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                                | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 7 | 8 | 8 |
|                                | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 | 5 | 6 |

females  
(cont...)

Adenoma

Carcinoma, Metastatic, Thyroid Gland

Parathyroid Gland

+ + + + + + + + + + + + + + M + + M + + + M M + +

Pituitary Gland

+ +

Pars Distalis, Adenoma

X X

Thyroid Gland

+ +

C-cell, Adenoma

X X

C-cell, Carcinoma

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+ +

Adenoma

X X

Bilateral, Adenoma

Ovary

+ +

Bilateral, Carcinoma, Metastatic, Thyroid Gland

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>0 MG/L</b>                  | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                                | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 8 |
|                                | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 |
|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

females  
(cont...)

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Uterus        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Polyp Stromal |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | X | X | X |   |  |

**HEMATOPOIETIC SYSTEM**

|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Deep Cervical, Carcinoma, Metastatic,  
Thyroid GlandMediastinal, Carcinoma, Metastatic,  
Thyroid Gland

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**INTEGUMENTARY SYSTEM**

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                         | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| DAY ON TEST             | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                         | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 |
|                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| FISCHER 344 RATS FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID               | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| 0 MG/L                  | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 8 |
|                         | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 |

females  
(cont...)

Carcinoma

Fibroadenoma

Fibroadenoma, Multiple

X X

Skin

+ +

Subcutaneous Tissue, Fibroma

X

## MUSCULOSKELETAL SYSTEM

Bone

+ +

Vertebra, Osteosarcoma

X

## NERVOUS SYSTEM

Brain

+ +

Peripheral Nerve

+

Spinal Cord

+

## RESPIRATORY SYSTEM

Lung

+ +

Alveolar/Bronchiolar Adenoma

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                                     | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>0 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|   | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 7 | 7 | 8 |
|   | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 |

females  
(cont...)

Carcinoma, Metastatic, Thyroid Gland

Nose +

Trachea +

**SPECIAL SENSES SYSTEM**

Eye +

Harderian Gland +

**URINARY SYSTEM**

Kidney +

Carcinoma, Metastatic, Thyroid Gland

Renal Tubule, Adenoma

Urinary Bladder +

**SYSTEMIC LESIONS**

Multiple Organ +

Histiocytic Sarcoma X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST   | 4 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   | 1 | 6 | 8 | 0 | 0 | 2 | 1 | 3 | 3 | 6 | 6 | 6 | 7 | 8 | 9 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 1 | 8 | 3 | 5 | 5 | 5 | 2 | 4 | 7 | 8 | 8 | 8 | 9 | 2 | 4 | 5 | 1 | 1 | 1 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>0 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 2 | 3 | 3 | 2 | 2 | 3 | 3 | 2 | 3 | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|   | 9 | 2 | 1 | 7 | 9 | 1 | 2 | 8 | 1 | 8 | 2 | 2 | 0 | 0 | 6 | 8 | 9 | 9 | 9 | 9 | 7 | 7 | 8 |
|   | 7 | 7 | 2 | 7 | 5 | 5 | 6 | 8 | 3 | 1 | 1 | 8 | 3 | 5 | 5 | 2 | 0 | 1 | 2 | 3 | 5 | 6 | 8 |

females  
(cont...)

Leukemia Mononuclear

X X X X X X X X X X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|
|                                | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 | 7 |
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 |
|                                | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6               | 6 | 6 |
| .....                          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 |
| <b>ANIMAL ID</b>               | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2               | 2 | 2 |
| <b>0 MG/L</b>                  | 8 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 6 | 8 | 8               | 8 | 8 |
|                                | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 | * <b>TOTALS</b> |   |   |

**ALIMENTARY SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Cecum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |   |
| Intestine Large, Colon               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Rectum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Intestine Small, Ileum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Intestine Small, Jejunum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Leiomyosarcoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Liver                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Mesentery                            |   | + |   |   | + |   |   | + |   |   |   |   |   |   |   |   |   |   |   | + | + | + |   |   |   |    | 9 |
| Oral Mucosa                          | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Carcinoma, Metastatic, Thyroid Gland | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Pharyngeal, Squamous Cell Papilloma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                          | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|
|                                      | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 |
|                                      | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6        | 6 | 6 |
| <b>FISCHER 344 RATS FEMALE</b>       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
| ANIMAL ID                            | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
| <b>0 MG/L</b>                        | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2        | 2 |   |
|                                      | 8 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 6 | 8 | 8        | 8 |   |
|                                      | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 | * TOTALS |   |   |
| Pancreas                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Salivary Glands                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Stomach, Forestomach                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Stomach, Glandular                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Tongue                               | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1 |   |
| Carcinoma, Metastatic, Thyroid Gland | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1 |   |

**CARDIOVASCULAR SYSTEM**

|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Heart             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Schwannoma Benign |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**ENDOCRINE SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Adrenal Cortex             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adrenal Medulla            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Pheochromocytoma Benign    |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Pheochromocytoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Islets, Pancreatic         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>0 MG/L</b> | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 |

**\* TOTALS**

|                                      |   |   |   |    |
|--------------------------------------|---|---|---|----|
| Adenoma                              | X | X | X | 3  |
| Carcinoma, Metastatic, Thyroid Gland | X |   |   | 1  |
| Parathyroid Gland                    | + | + | + | 42 |
| Pituitary Gland                      | + | + | + | 50 |
| Pars Distalis, Adenoma               | X | X | X | 28 |
| Thyroid Gland                        | + | + | + | 49 |
| C-cell, Adenoma                      |   | X | X | 6  |
| C-cell, Carcinoma                    | X |   |   | 1  |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Clitoral Gland                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma   |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 16 |   |
| Bilateral, Adenoma                              |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Ovary   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Bilateral, Carcinoma, Metastatic, Thyroid Gland | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|---|---|---|
| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 | 7 | 7 | 7 |   |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 | 3 | 3 |   |
|   | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5               | 6 | 6 | 6 | 6 |   |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>0 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |   |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |   |
|   | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 2 | 2 | 2 | 2 | 2 |
|   | 8 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 6 | 8               | 8 | 8 | 8 | 8 | 8 |
|   | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 | * <b>TOTALS</b> |   |   |   |   |   |

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Uterus        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Polyp Stromal |   |   |   |   |   | X | X |   |   | X | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 9  |

**HEMATOPOIETIC SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|--|----|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |
| Lymph Node   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 15 |
| Deep Cervical, Carcinoma, Metastatic,<br>Thyroid Gland |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |
| Mediastinal, Carcinoma, Metastatic,<br>Thyroid Gland   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |  | 1  |
| Lymph Node, Mandibular                                 | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 0  |  |    |
| Lymph Node, Mesenteric                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |
| Spleen   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |
| Thymus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |  |    |

**INTEGUMENTARY SYSTEM**

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|  | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6        | 6 |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|  | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 2        | 2 |
|  | 8 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 8 | 8 | 8        | 8 |
|  | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 | * TOTALS |   |

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Carcinoma                    | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 1  |    |
| Fibroadenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 21 |
| Fibroadenoma, Multiple       | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 22 |    |
| Skin                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Subcutaneous Tissue, Fibroma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |

**MUSCULOSKELETAL SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Vertebra, Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 5 |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |

**RESPIRATORY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

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Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 |
|   | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6        | 6 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>0 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|   | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2        | 2 |
|   | 8 | 2 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 8 | 8 | 8        | 8 |
|   | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 | * TOTALS |   |

|                                      |   |   |
|--------------------------------------|---|---|
| Carcinoma, Metastatic, Thyroid Gland | X | 1 |
|--------------------------------------|---|---|

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SPECIAL SENSES SYSTEM**

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**URINARY SYSTEM**

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                                      |   |   |
|--------------------------------------|---|---|
| Carcinoma, Metastatic, Thyroid Gland | X | 1 |
|--------------------------------------|---|---|

|                       |  |   |   |
|-----------------------|--|---|---|
| Renal Tubule, Adenoma |  | X | 1 |
|-----------------------|--|---|---|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Histiocytic Sarcoma |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>0 MG/L</b>                  | 2 | 3 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 2 |   |
|                                | 8 | 2 | 2 | 2 | 2 | 7 | 7 | 7 | 9 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 6 | 6 | 6 | 8 | 8 | 8 |   |
|                                | 7 | 0 | 2 | 3 | 4 | 0 | 1 | 2 | 6 | 0 | 1 | 2 | 6 | 7 | 0 | 1 | 6 | 7 | 8 | 5 | 6 | 7 | 0 | 3 | 4 |   |   |

Leukemia Mononuclear

X

X

X

X

X

15

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST             | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS FEMALE | 9 | 9 | 0 | 2 | 6 | 8 | 9 | 1 | 1 | 2 | 4 | 7 | 7 | 7 | 7 | 8 | 8 | 9 | 0 | 3 | 3 | 3 | 3 |
| ANIMAL ID               | 5 | 3 | 7 | 5 | 8 | 4 | 6 | 0 | 8 | 6 | 5 | 4 | 9 | 9 | 9 | 2 | 2 | 9 | 7 | 4 | 4 | 4 | 4 |
| 250 MG/L                | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                         | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                         | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 3 | 3 | 5 |
|                         | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 | 3 | 4 |

females  
(cont...)**ALIMENTARY SYSTEM**

Esophagus

+ +

Intestine Large, Cecum

+ + A + + A +

Intestine Large, Colon

+ + A +

Intestine Large, Rectum

+ +

Intestine Small, Duodenum

+ + A +

Intestine Small, Ileum

+ + A + + A +

Intestine Small, Jejunum

+ + A +

Liver

+ +

Mesentery

+ +

Pancreas

+ +

Salivary Glands

+ +

Stomach, Forestomach

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 9 | 9 | 0 | 2 | 6 | 8 | 9 | 1 | 1 | 2 | 4 | 7 | 7 | 7 | 7 | 8 | 8 | 9 | 0 | 3 | 3 | 3 | 3 |
|                                | 5 | 3 | 7 | 5 | 8 | 4 | 6 | 0 | 8 | 6 | 5 | 4 | 9 | 9 | 9 | 2 | 2 | 9 | 7 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 3 | 5 | 8 |
|                                | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 | 3 | 4 |
|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Stomach, Glandular             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## CARDIOVASCULAR SYSTEM

|              |       |   |
|--------------|-------|---|
| Blood Vessel | ..... | + |
| Heart        | ..... | + |

## ENDOCRINE SYSTEM

|                            |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|----------------------------|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Adrenal Cortex             | ..... | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adrenal Medulla            | ..... | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Pheochromocytoma Benign    |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pheochromocytoma Malignant |       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Islets, Pancreatic         | ..... | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma                    | ..... |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Parathyroid Gland          | ..... | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | M | + | M | + | + | + | + |  |
| Pituitary Gland            | ..... | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Pars Distalis, Adenoma     | ..... | X |   | X | X | X | X | X | X |   | X |   | X | X | X | X | X | X | X | X | X | X | X |  |
| Thyroid Gland              | ..... | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

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Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST             | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FISCHER 344 RATS FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 250 MG/L                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                         | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 5 |
|                         | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 |
|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

females  
(cont...)

Bilateral, C-cell, Adenoma

X

C-cell, Adenoma

X

Follicular Cell, Adenoma

X X

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Clitoral Gland

+ +

Adenoma

X X X X

Carcinoma

X

Bilateral, Adenoma

Ovary

+ +

Uterus

+ +

Adenocarcinoma

Adenoma

Polyp Stromal

X X

Vagina

## HEMATOPOIETIC SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 9 | 9 | 0 | 2 | 6 | 8 | 9 | 1 | 1 | 2 | 4 | 7 | 7 | 7 | 7 | 8 | 8 | 9 | 0 | 3 | 3 | 3 | 3 |
|                                | 5 | 3 | 7 | 5 | 8 | 4 | 6 | 0 | 8 | 6 | 5 | 4 | 9 | 9 | 9 | 2 | 2 | 9 | 7 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 3 | 5 | 8 |
|                                | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 | 3 | 4 |

**females  
(cont...)**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node             | + |   | + | + | + | + | + |   | + | + | + | + | + | + |   | + | + | + | + | + | + | + |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**INTEGUMENTARY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma                 |   |   |   | X | X | X |   | X | X | X |   | X | X | X | X |   |   |   |   |   |   |   |
| Fibroadenoma, Multiple       |   |   |   |   |   | X |   | X |   | X |   |   | X | X |   | X | X | X | X | X | X | X |
| Skin                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Basal Cell Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Keratoacanthoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Trichoepithelioma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Fibroma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                                      | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
|  | 9 | 9 | 0 | 2 | 6 | 8 | 9 | 1 | 1 | 2 | 4 | 7 | 7 | 7 | 7 | 8 | 8 | 9 | 0 | 3 | 3 |
|  | 5 | 3 | 7 | 5 | 8 | 4 | 6 | 0 | 8 | 6 | 5 | 4 | 9 | 9 | 9 | 2 | 2 | 9 | 7 | 4 | 4 |
| FISCHER 344 RATS FEMALE<br>ANIMAL ID<br>250 MG/L | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|  | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 3 |
|  | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 |

females  
(cont...)

Subcutaneous Tissue, Schwannoma Nos

**MUSCULOSKELETAL SYSTEM**

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**RESPIRATORY SYSTEM**

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Alveolar/Bronchiolar Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Osteosarcoma, Metastatic, Bone |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |
| Nose                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 3 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 9 | 9 | 0 | 2 | 6 | 8 | 9 | 1 | 1 | 2 | 4 | 7 | 7 | 7 | 7 | 8 | 8 | 9 | 0 | 3 | 3 | 3 | 3 |
|                                | 5 | 3 | 7 | 5 | 8 | 4 | 6 | 0 | 8 | 6 | 5 | 4 | 9 | 9 | 9 | 2 | 2 | 9 | 7 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 7 | 7 | 5 | 9 | 8 | 3 | 6 | 5 | 8 | 7 | 4 | 4 | 4 | 6 | 6 | 6 | 7 | 5 | 3 | 3 | 3 | 5 | 8 |
|                                | 7 | 6 | 6 | 3 | 2 | 7 | 8 | 8 | 1 | 3 | 1 | 6 | 3 | 3 | 4 | 7 | 8 | 2 | 6 | 1 | 2 | 3 | 4 |

females  
(cont...)

**SPECIAL SENSES SYSTEM**

Eye

+ +

Harderian Gland

+ +

Zymbal's Gland

+

Adenoma

X

Carcinoma

**URINARY SYSTEM**

Kidney

+ +

Lipoma

.....

Urinary Bladder

+ +

**SYSTEMIC LESIONS**

Multiple Organ

+ +

Leukemia Mononuclear

X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

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Species/Strain: RATS/F 344

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Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|---|---|
|                                | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 | 7 | 7 |   |
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 | 3 | 3 |
|                                | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6               | 6 | 6 | 6 | 6 |
| .....                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |   |   |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |
| <b>250 MG/L</b>                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 | 3 | 3 |
|                                | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 7 | 4 | 4 | 6 | 6 | 6 | 6 | 7 | 7 | 7               | 7 | 7 | 7 | 7 |
|                                | 4 | 6 | 7 | 8 | 9 | 1 | 2 | 4 | 8 | 9 | 0 | 2 | 1 | 3 | 4 | 9 | 7 | 8 | 1 | 2 | 6 | 9 | 1 | 2 | 4 | * <b>TOTALS</b> |   |   |   |   |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |   |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 9 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

**Test Type:** CHRONIC

**Route:** DOSED WATER

**Species/Strain:** RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

## WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

**CAS Number:** 5589-96-8

**Pathologist:** GILES, H. - HEATH, J. - Blackshear, P.

Date Report Requested: 03/28/2006

Time Report Requested: 15:00:22

**First Dose M/F:** 09/26/01 / 09/26/01

Lab: SRI

## CARDIOVASCULAR SYSTEM

A horizontal bar chart showing the relationship between Blood Vessel type and Heart location. The x-axis represents the number of observations from 1 to 50. The y-axis lists blood vessel types: Artery, Vein, Capillary, Lymphatic, and Nerve. Arrows point from each vessel type to its corresponding count on the x-axis.

| Blood Vessel | Count |
|--------------|-------|
| Artery       | 1     |
| Vein         | 1     |
| Capillary    | 1     |
| Lymphatic    | 1     |
| Nerve        | 1     |

# **ENDOCRINE SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

† = Tissue examined microscopically

A - Autolysis precludes evaluation

Lesion present

**BLANK** Not examined microscopically

.. Lesion present  
 Insufficient tissue

BEANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Lab: SRI

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
| DAY ON TEST             | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |
|                         | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |
|                         | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        |
| FISCHER 344 RATS FEMALE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| ANIMAL ID               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
| 250 MG/L                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |
|                         | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 7 | 4 | 4 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | * TOTALS |
|                         | 4 | 6 | 7 | 8 | 9 | 1 | 2 | 4 | 8 | 9 | 0 | 2 | 1 | 3 | 4 | 9 | 7 | 8 | 1 | 2 | 6 | 9 | 1 | 2 | 4 |   |   |   |          |

Bilateral, C-cell, Adenoma

1

C-cell, Adenoma

X

6

Follicular Cell, Adenoma

X

1

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+ + + + + + + + + + M + 49

Adenoma

X X X X X X X X X X X X X X X X 10

Carcinoma

X X X X X X X X X X X X X X X X 2

Bilateral, Adenoma

X X X X X X X X X X X X X X X X 1

Ovary

+ 50

Uterus

+ 50

Adenocarcinoma

X X X X X X X X X X X X X X X X 1

Adenoma

X X X X X X X X X X X X X X X X 1

Polyp Stromal

X X X X X X X X X X X X X X X X 6

Vagina

+ 1

**HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

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|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                                | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                                | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6               | 6 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 |
| <b>250 MG/L</b>                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                                | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 7 | 4 | 4 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | * <b>TOTALS</b> |   |
|                                | 4 | 6 | 7 | 8 | 9 | 1 | 2 | 4 | 8 | 9 | 0 | 2 | 1 | 3 | 4 | 9 | 7 | 8 | 1 | 2 | 6 | 9 | 1 | 2 | 4 |   |   |   |                 |   |

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Lymph Node             | + | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 20 |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 2  |    |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |

**INTEGUMENTARY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|---|
| Mammary Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |   |
| Carcinoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Fibroadenoma                 | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 20 |    |   |
| Fibroadenoma, Multiple       |   | X |   |   | X |   |   | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X  | 23 |   |
| Skin                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Basal Cell Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Keratoacanthoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Trichoepithelioma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |
| Subcutaneous Tissue, Fibroma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |    |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

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Lab: SRI

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                                      | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|  | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| FISCHER 344 RATS FEMALE<br>ANIMAL ID<br>250 MG/L | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|  | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 7 | 4 | 4 | 6 | 6 | 6 | 6 | 7 | 7 | 7 |
|  | 4 | 6 | 7 | 8 | 9 | 1 | 2 | 4 | 8 | 9 | 0 | 2 | 1 | 3 | 4 | 9 | 7 | 8 | 1 | 2 | 6 | 9 | 1 | 2 | 4 |

\* TOTALS

Subcutaneous Tissue, Schwannoma Nos

X

1

## MUSCULOSKELETAL SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Osteosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## NERVOUS SYSTEM

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |

## RESPIRATORY SYSTEM

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Alveolar/Bronchiolar Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 1  |
| Osteosarcoma, Metastatic, Bone |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|---|
| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 | 7 | 7 |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 | 3 |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        | 6 | 6 | 6 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>250 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 | 0 | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 | 0 | 0 |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 | 3 |
|   | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 3 | 3 | 4 | 4 | 5 | 5 | 5 | 5 | 7 | 4 | 4 | 6 | 6 | 6 | 6 | 7 | 7 | 7        | 7 | 7 | 7 |
|   | 4 | 6 | 7 | 8 | 9 | 1 | 2 | 4 | 8 | 9 | 0 | 2 | 1 | 3 | 4 | 9 | 7 | 8 | 1 | 2 | 6 | 9 | 1 | 2 | 4 | * TOTALS |   |   |   |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Zymbal's Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lipoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

**SYSTEMIC LESIONS**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Multiple Organ       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Leukemia Mononuclear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 12 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 3 | 7 | 4 | 2 | 2 | 3 | 3 | 5 | 6 | 6 | 0 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 0 | 8 | 0 | 7 | 9 | 1 | 7 | 2 | 8 | 8 | 9 | 7 | 7 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>                | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|                                | 5 | 0 | 5 | 1 | 3 | 5 | 1 | 9 | 9 | 0 | 3 | 4 | 4 | 4 | 2 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |
|                                | 8 | 3 | 2 | 0 | 4 | 0 | 7 | 8 | 9 | 0 | 2 | 7 | 4 | 5 | 7 | 8 | 9 | 2 | 3 | 4 | 2 | 3 | 4 | 7 | 8 |

females  
(cont...)

## ALIMENTARY SYSTEM

Esophagus

+ +

Intestine Large, Cecum

A + + A +

Intestine Large, Colon

+ +

Adenoma

Intestine Large, Rectum

+ +

Adenoma

Intestine Small, Duodenum

A +

Intestine Small, Ileum

A + + A +

Intestine Small, Jejunum

A + + A +

Liver

+ +

Mesentery

+ +

Pancreas

+ +

Salivary Glands

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                                       | 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   | 3 | 7 | 4 | 2 | 2 | 3 | 3 | 5 | 6 | 6 | 0 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 0 | 8 | 0 | 7 | 9 | 1 | 7 | 2 | 8 | 8 | 9 | 7 | 7 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   | 5 | 0 | 5 | 1 | 3 | 5 | 1 | 9 | 9 | 0 | 3 | 4 | 4 | 4 | 2 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |
|   | 8 | 3 | 2 | 0 | 4 | 0 | 7 | 8 | 9 | 0 | 2 | 7 | 4 | 5 | 7 | 8 | 9 | 2 | 3 | 4 | 2 | 3 | 4 | 7 | 8 |

females  
(cont...)

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

Tongue

Squamous Cell Papilloma

**CARDIOVASCULAR SYSTEM**

Heart

+ +

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ +

Adrenal Medulla

+ +

Pheochromocytoma Benign

X X

Islets, Pancreatic

+ +

Adenoma

X

Parathyroid Gland

+ + + + M +

Pituitary Gland

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue



TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 3 | 7 | 4 | 2 | 2 | 3 | 3 | 5 | 6 | 6 | 0 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 0 | 8 | 0 | 7 | 9 | 1 | 7 | 2 | 8 | 8 | 9 | 7 | 7 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>500 MG/L</b>                | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|                                | 5 | 0 | 5 | 1 | 3 | 5 | 1 | 9 | 9 | 0 | 3 | 4 | 4 | 4 | 2 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |
|                                | 8 | 3 | 2 | 0 | 4 | 0 | 7 | 8 | 9 | 0 | 2 | 7 | 4 | 5 | 7 | 8 | 9 | 2 | 3 | 4 | 2 | 3 | 4 | 7 |

females  
(cont...)

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lymph Node             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**INTEGUMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibroadenoma                           | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |
| Fibroadenoma, Multiple                 |   | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |
| Skin                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Keratoacanthoma                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pinna, Neural Crest Tumor              |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Fibroma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Fibroma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST | 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 3 | 7 | 4 | 2 | 2 | 3 | 3 | 5 | 6 | 6 | 0 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|             | 0 | 8 | 0 | 7 | 9 | 1 | 7 | 2 | 8 | 8 | 9 | 7 | 7 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |

  

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   | 5 | 0 | 5 | 1 | 3 | 5 | 1 | 9 | 9 | 0 | 3 | 4 | 4 | 4 | 2 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 |
|   | 8 | 3 | 2 | 0 | 4 | 0 | 7 | 8 | 9 | 0 | 2 | 7 | 4 | 5 | 7 | 8 | 9 | 2 | 3 | 4 | 2 | 3 | 4 |

females  
(cont...)

Bone +

**NERVOUS SYSTEM**

Brain +

Carcinoma, Metastatic, Pituitary Gland X

Granular Cell Tumor Benign X

Peripheral Nerve +

Spinal Cord +

**RESPIRATORY SYSTEM**

Lung +

Alveolar/Bronchiolar Adenoma

Nose +

Trachea +

**SPECIAL SENSES SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST | 0 | 4 | 5 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|             | 3 | 7 | 4 | 2 | 2 | 3 | 3 | 5 | 6 | 6 | 0 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|             | 0 | 8 | 0 | 7 | 9 | 1 | 7 | 2 | 8 | 8 | 9 | 7 | 7 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |

  

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|   | 5 | 0 | 5 | 1 | 3 | 5 | 1 | 9 | 9 | 0 | 3 | 4 | 4 | 4 | 2 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 |
|   | 8 | 3 | 2 | 0 | 4 | 0 | 7 | 8 | 9 | 0 | 2 | 7 | 4 | 5 | 7 | 8 | 9 | 2 | 3 | 4 | 2 | 3 | 4 |
|   | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |

females  
(cont...)

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| .....           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

**SYSTEMIC LESIONS**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Multiple Organ       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Leukemia Mononuclear | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 7               | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|--------------------------------|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 3               | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 4               | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| <b>FISCHER 344 RATS FEMALE</b> | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>ANIMAL ID</b>               | 0               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>500 MG/L</b>                | 4               | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |   |
|                                | 2               | 3 | 3 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 9 | 0 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 |   |
|                                | 9               | 0 | 3 | 2 | 4 | 5 | 8 | 9 | 0 | 1 | 7 | 8 | 9 | 8 | 9 | 7 | 1 | 2 | 3 | 5 | 3 | 4 | 7 | 9 | 0 |   |   |
|                                | <b>* TOTALS</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**ALIMENTARY SYSTEM**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   | 2  |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mesentery                 | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   | 9  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |               |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------------|---|
|   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7             | 7 |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3             | 3 |
|   | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6             | 6 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 |
| <b>ANIMAL ID</b>                                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0             | 0 |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4             | 4 |
|   | 2 | 3 | 3 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 9 | 0 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6             |   |
|   | 9 | 0 | 3 | 2 | 4 | 5 | 8 | 9 | 0 | 1 | 7 | 8 | 9 | 8 | 9 | 7 | 1 | 2 | 3 | 5 | 3 | 4 | 7 | 9 | 0 | * | <b>TOTALS</b> |   |

Stomach, Forestomach

+ 50

Stomach, Glandular

+ 50

Tongue

+

Squamous Cell Papilloma

X

**CARDIOVASCULAR SYSTEM**

Heart

+ 50

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ 50

Adrenal Medulla

+ 50

Pheochromocytoma Benign

X X

Islets, Pancreatic

+ 50

Adenoma

Parathyroid Gland

+ + + + + + M + M M + 44

Pituitary Gland

+ 50

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 |
|   | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        | 6 |   |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 4 |   |
|   | 2 | 3 | 3 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 9 | 0 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6        |   |   |
|   | 9 | 0 | 3 | 2 | 4 | 5 | 8 | 9 | 0 | 1 | 7 | 8 | 9 | 8 | 9 | 7 | 1 | 2 | 3 | 5 | 3 | 4 | 7 | 9 | 0 | * TOTALS |   |   |
| Pars Distalis, Adenoma  | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 30       |   |   |
| Pars Distalis, Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 1 |   |
| Thyroid Gland   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Bilateral, C-cell, Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 2 |   |
| C-cell, Adenoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 8 |   |
| Follicular Cell, Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          | 2 |   |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |   |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|---|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 8 |
| Ovary          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Uterus         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |   |
| Polyp Stromal  | X |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 13 |    |   |

**HEMATOPOIETIC SYSTEM**

|             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                     | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                                     | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                     | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
|                                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                                     | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                                     | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|                                     | 2 | 3 | 3 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 9 | 0 | 4 | 4 | 4 | 5 | 5 | 5 |
|                                     | 9 | 0 | 3 | 2 | 4 | 5 | 8 | 9 | 0 | 1 | 7 | 8 | 9 | 8 | 9 | 7 | 1 | 2 | 3 | 5 | 3 | 4 | 7 | 9 |
|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| FISCHER 344 RATS FEMALE<br>500 MG/L |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* TOTALS

Lymph Node

+

+

+

11

Lymph Node, Mandibular

M

M

M

M

M

M

+

M

M

M

M

M

M

M

M

M

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M

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M

M

1

Lymph Node, Mesenteric

+

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Spleen

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Thymus

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## INTEGUMENTARY SYSTEM

Mammary Gland

+

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50

Fibroadenoma

X

4

Fibroadenoma, Multiple

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

43

Skin

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

+

50

Keratoacanthoma

X

1

Pinna, Neural Crest Tumor

1

Subcutaneous Tissue, Fibroma

X

Subcutaneous Tissue, Fibroma, Multiple

X

1

## MUSCULOSKELETAL SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |                 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------------|
| DAY ON TEST   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7         | 7               |
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3         | 3               |
|   | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6         | 6               |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0         | <b>* TOTALS</b> |
| Bone  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |                 |

**NERVOUS SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |          |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------|
| Brain                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |          |
| Carcinoma, Metastatic, Pituitary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b> |
| Granular Cell Tumor Benign             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b> |
| Peripheral Nerve                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b> |
| Spinal Cord                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>1</b> |

**RESPIRATORY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |          |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|----------|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |          |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           | <b>2</b> |
| Nose                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |          |
| Trachea                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |          |

**SPECIAL SENSES SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                                       | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|
|   | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 |
|   | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        | 6 |   |
| <b>FISCHER 344 RATS FEMALE</b><br><b>500 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
| ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |   |
|   | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4        | 4 |   |
|   | 2 | 3 | 3 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 4 | 9 | 0 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6        |   |   |
|   | 9 | 0 | 3 | 2 | 4 | 5 | 8 | 9 | 0 | 1 | 7 | 8 | 9 | 8 | 9 | 7 | 1 | 2 | 3 | 5 | 3 | 4 | 7 | 9 | 0 | * TOTALS |   |   |
| Eye   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |
| Harderian Gland                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |   |   |

## URINARY SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## SYSTEMIC LESIONS

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   | 12 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

l .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 2 | 3 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 5 | 8 | 0 | 1 | 3 | 3 | 6 | 6 | 6 | 8 | 8 | 9 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 8 | 1 | 4 | 8 | 6 | 7 | 0 | 8 | 8 | 8 | 2 | 7 | 2 | 5 | 7 | 9 | 9 | 9 | 9 | 1 | 1 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>1000 MG/L</b>               | 5 | 5 | 5 | 5 | 4 | 4 | 5 | 4 | 4 | 5 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 4 |
|                                | 0 | 0 | 0 | 2 | 7 | 6 | 0 | 7 | 7 | 0 | 8 | 1 | 7 | 8 | 9 | 7 | 7 | 1 | 1 | 1 | 7 | 8 | 8 | 8 | 9 |
|                                | 3 | 9 | 8 | 1 | 9 | 7 | 4 | 1 | 4 | 1 | 4 | 3 | 5 | 5 | 3 | 3 | 6 | 0 | 1 | 2 | 8 | 0 | 8 | 9 | 0 |

females  
(cont...)

## ALIMENTARY SYSTEM

Esophagus

+ +

Intestine Large, Cecum

+ +

Leiomyosarcoma

X

Intestine Large, Colon

+ +

Adenoma

X

Adenoma, Multiple

Intestine Large, Rectum

+ +

Adenoma

X

Intestine Small, Duodenum

+ +

Intestine Small, Ileum

+ A +

Intestine Small, Jejunum

+ A +

Liver

+ +

Hepatocellular Adenoma

X

Leiomyosarcoma, Metastatic, Uncertain  
Primary Site

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue



TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

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Date Report Reqsted: 03/28/2006

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| <b>FISCHER 344 RATS FEMALE</b><br><b>1000 MG/L</b> | ANIMAL ID | 2 | 3 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |  |
|  |           | 5 | 8 | 0 | 1 | 3 | 3 | 6 | 6 | 6 | 6 | 8 | 9 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 |   |  |
|  |           | 8 | 1 | 4 | 8 | 6 | 7 | 0 | 8 | 8 | 8 | 2 | 7 | 2 | 5 | 7 | 9 | 9 | 9 | 9 | 1 | 1 | 4 | 4 | 4 |   |  |
| .....  |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| .....  |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| .....  |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| .....  |           | 5 | 5 | 5 | 5 | 4 | 4 | 5 | 4 | 4 | 5 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 4 |  |
| .....  |           | 0 | 0 | 0 | 2 | 7 | 6 | 0 | 7 | 7 | 0 | 8 | 1 | 7 | 8 | 9 | 7 | 7 | 1 | 1 | 1 | 7 | 8 | 8 | 8 | 9 |  |
| .....  |           | 3 | 9 | 8 | 1 | 9 | 7 | 4 | 1 | 4 | 1 | 4 | 3 | 5 | 5 | 3 | 3 | 6 | 0 | 1 | 2 | 8 | 0 | 8 | 9 | 0 |  |

females  
(cont...)

Adrenal Medulla

+ X X

Pheochromocytoma Benign

Pheochromocytoma Complex

Bilateral, Pheochromocytoma Benign

Islets, Pancreatic

+ X

Adenoma

Carcinoma

Parathyroid Gland

+ M

Pituitary Gland

+ X X

Pars Distalis, Adenoma

Thyroid Gland

+ X

Bilateral, C-cell, Adenoma

C-cell, Adenoma

Follicular Cell, Adenoma

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

| DAY ON TEST                    | 2 | 3 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                | 5 | 8 | 0 | 1 | 3 | 3 | 6 | 6 | 6 | 8 | 8 | 9 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 8 | 1 | 4 | 8 | 6 | 7 | 0 | 8 | 8 | 8 | 2 | 7 | 2 | 5 | 7 | 9 | 9 | 9 | 9 | 1 | 1 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| <b>1000 MG/L</b>               | 5 | 5 | 5 | 5 | 4 | 4 | 5 | 4 | 4 | 5 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 4 |   |
|                                | 0 | 0 | 0 | 2 | 7 | 6 | 0 | 7 | 7 | 0 | 8 | 1 | 7 | 8 | 9 | 7 | 7 | 1 | 1 | 1 | 7 | 8 | 8 | 8 | 9 |   |
|                                | 3 | 9 | 8 | 1 | 9 | 7 | 4 | 1 | 4 | 1 | 4 | 3 | 5 | 5 | 3 | 3 | 6 | 0 | 1 | 2 | 8 | 0 | 8 | 9 | 0 |   |

females  
(cont...)

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Clitoral Gland     | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma            |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma          |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |  |
| Bilateral, Adenoma |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Ovary              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Uterus             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Polyp Stromal      |   |   |   |   |   | X |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |  |
| Vagina             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymph Node             | + | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M |  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Hemangiosarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

x .. Lesion present

BLANK .. Not examined microscopically

| .. Insufficient tissue



TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Date Report Reqsted: 03/28/2006

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Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| DAY ON TEST                    | 2 | 3 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                                | 5 | 8 | 0 | 1 | 3 | 3 | 6 | 6 | 6 | 6 | 8 | 8 | 9 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|                                | 8 | 1 | 4 | 8 | 6 | 7 | 0 | 8 | 8 | 8 | 2 | 7 | 2 | 5 | 7 | 9 | 9 | 9 | 9 | 9 | 1 | 1 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| <b>1000 MG/L</b>               | 5 | 5 | 5 | 5 | 4 | 4 | 5 | 4 | 4 | 5 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
|                                | 0 | 0 | 0 | 2 | 7 | 6 | 0 | 7 | 7 | 0 | 8 | 1 | 7 | 8 | 9 | 7 | 7 | 1 | 1 | 1 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 |
|                                | 3 | 9 | 8 | 1 | 9 | 7 | 4 | 1 | 4 | 1 | 4 | 3 | 5 | 5 | 3 | 3 | 6 | 0 | 1 | 2 | 8 | 0 | 8 | 9 | 0 | 0 | 0 | 0 | 0 | 0 |

females  
(cont...)**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Peripheral Nerve | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord      | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |  |

**RESPIRATORY SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |
| Alveolar/Bronchiolar Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma, Metastatic, Skin          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Squamous Cell Carcinoma              |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Nose                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |
| Trachea                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

**SPECIAL SENSES SYSTEM**

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|--|--|--|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |  |  |  |
|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |  |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

**Test Type:** CHRONIC

**Route:** DOSED WATER

**Species/Strain:** RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

**Pathologist:** GILES, H. - HEATH, J. - Blackshear, P.

Date Report Requested: 03/28/2006

Time Report Registered: 15:00:22

**First Dose M/F:** 09/26/01 / 09/26/01

## Lab: SRI

# URINARY SYSTEM

Kidney

## Urinary Bladder

## **SYSTEMIC LESIONS**

## Multiple Organ

#### **Leukemia Mononuclear**

X X X X X X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x Lesion present

✗ .. Lesion present  
| Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK Not examined microscopically

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Lab: SRI

| DAY ON TEST                    | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 |
|                                | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6               | 6 |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               |   |
| <b>1000 MG/L</b>               | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5               |   |
|                                | 6 | 6 | 6 | 6 | 9 | 9 | 0 | 6 | 6 | 7 | 8 | 8 | 8 | 9 | 9 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2               |   |
|                                | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 8 | 9 | 0 | 3 | 6 | 7 | 4 | 5 | 5 | 4 | 5 | 6 | 8 | 9 | 0 | 3 | 4 | 5 | * <b>TOTALS</b> |   |

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Leiomyosarcoma                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Large, Colon                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 5  |
| Adenoma, Multiple                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 1  |
| Intestine Large, Rectum                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2  |
| Intestine Small, Duodenum                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Ileum                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Intestine Small, Jejunum                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hepatocellular Adenoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 3  |
| Leiomyosarcoma, Metastatic, Uncertain Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

**Test Type:** CHRONIC

**Route:** DOSED WATER

**Species/Strain:** RATS/F 344

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

## WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

CAS Number: 5589-96-8

**Pathologist:** GILES, H. - HEATH, J. - Blackshear, P

Date Report Requested: 03/28/2006

Time Report Registered: 15:00:22

**First Dose M/F:** 09/26/01 / 09/26/01

Lab: SRI

|                         |   |    |
|-------------------------|---|----|
| Mesentery               | + | 6  |
| Leiomyosarcoma          |   | 1  |
| Oral Mucosa             |   | 1  |
| Squamous Cell Carcinoma |   | 1  |
| Pancreas                | + | 50 |
| Salivary Glands         | + | 50 |
| Stomach, Forestomach    | + | 50 |
| Stomach, Glandular      | + | 50 |
| Leiomyosarcoma          |   | 1  |

## CARDIOVASCULAR SYSTEM

## **ENDOCRINE SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

† = Tissue examined microscopically

x Lesion present

| Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Lab: SRI

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>1000 MG/L</b> | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        |
|  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        |
|  | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5        |
|  | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 0 | 6 | 6 | 7 | 8 | 8 | 8 | 9 | 9 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2        |
|  | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 8 | 9 | 0 | 3 | 6 | 7 | 4 | 5 | 5 | 4 | 5 | 6 | 8 | 9 | 0 | 3 | 4 | 5 | * TOTALS |

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|----|
| Adrenal Medulla                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Pheochromocytoma Benign            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |    | 4  |    |
| Pheochromocytoma Complex           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |    |
| Bilateral, Pheochromocytoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |    |
| Islets, Pancreatic                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |    |
| Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 2  |    |
| Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    | 1  |    |
| Parathyroid Gland                  | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | M | + | + | + | + | M  | +  | 42 |
| Pituitary Gland                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Pars Distalis, Adenoma             | X | X |   |   |   | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X  | 26 |    |
| Thyroid Gland                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |    |
| Bilateral, C-cell, Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 1  |    |
| C-cell, Adenoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |    | 7  |    |
| Follicular Cell, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |    | 1  |    |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

TDMS No. 96019 - 05

Test Type: CHRONIC

Route: DOSED WATER

Species/Strain: RATS/F 344

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WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

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Pathologist: GILES, H. - HEATH, J. - Blackshear, P.

Date Report Reqsted: 03/28/2006

Time Report Reqsted: 15:00:22

First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|---|---|---|---|
|                                | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7               | 7 | 7 | 7 |   |   |
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3               | 3 | 3 | 3 | 3 |   |
|                                | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6               | 6 | 6 | 6 | 6 |   |
| <b>FISCHER 344 RATS FEMALE</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |   |
| <b>ANIMAL ID</b>               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0               | 0 | 0 | 0 | 0 |   |
| <b>1000 MG/L</b>               | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5               | 5 | 5 | 5 | 5 | 5 |
|                                | 6 | 6 | 6 | 6 | 9 | 9 | 0 | 6 | 6 | 7 | 8 | 8 | 8 | 9 | 9 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2               | 2 | 2 | 2 | 2 | 2 |
|                                | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 8 | 9 | 0 | 3 | 6 | 7 | 4 | 5 | 5 | 4 | 5 | 6 | 8 | 9 | 0 | 3 | 4 | 5 | * <b>TOTALS</b> |   |   |   |   |   |

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Clitoral Gland     | + | + | + | + | + | + | + | M | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 47 |   |
| Adenoma            |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 9 |
| Carcinoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Bilateral, Adenoma |   |   |   |   | X |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Ovary              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Uterus             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Polyp Stromal      |   |   |   |   | X |   | X | X | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   | 11 |   |
| Vagina             |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |   |
| Lymph Node             |   |   |   |   | + | + |   |   |   | + | + | + | + |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 16 |   |
| Lymph Node, Mandibular | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | M | 1  |    |   |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |   |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |   |
| Hemangiosarcoma        |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

TDMS No. 96019 - 05

**Test Type:** CHRONIC

**Route:** DOSED WATER

**Species/Strain:** RATS/F 344

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

## WATER DISINFECTION BYPRODUCTS (BROMOCHLOROACETIC ACID)

**CAS Number:** 5589-96-8

**Pathologist:** GILES, H. - HEATH, J. - Blackshear, P

Date Report Requested: 03/28/2006

Time Report Registered: 15:00:22

**First Dose M/F:** 09/26/01 / 09/26/01

Lab: SRI

## INTEGUMENTARY SYSTEM

## MUSCULOSKELETAL SYSTEM

\* .. Total animals with tissue examined microscopically: Total animals with tumor

† = Tissue examined microscopically

Lesion present

.. Lesion present  
 Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
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|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|---|
| DAY ON TEST  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 | 7 | 7 |
|  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3        | 3 | 3 | 3 |
|  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6        | 6 | 6 | 6 |
| <b>FISCHER 344 RATS FEMALE</b><br><b>ANIMAL ID</b><br><b>1000 MG/L</b> | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 | 0 | 0 |
|  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 | 0 | 0 |
|  | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5        | 5 | 5 | 5 |
|  | 6 | 6 | 6 | 6 | 6 | 9 | 9 | 0 | 6 | 6 | 7 | 8 | 8 | 8 | 9 | 9 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2        | 2 | 2 | 2 |
|  | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 8 | 9 | 0 | 3 | 6 | 7 | 4 | 5 | 5 | 4 | 5 | 6 | 8 | 9 | 0 | 3 | 4 | 5 | * TOTALS |   |   |   |

**NERVOUS SYSTEM**

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Peripheral Nerve |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Spinal Cord      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |

**RESPIRATORY SYSTEM**

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Lung                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Alveolar/Bronchiolar Adenoma         |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Carcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Carcinoma, Metastatic, Skin          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Squamous Cell Carcinoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Nose                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Trachea                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

**SPECIAL SENSES SYSTEM**

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

x .. Lesion present

| .. Insufficient tissue

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First Dose M/F: 09/26/01 / 09/26/01

Lab: SRI

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| DAY ON TEST                    | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7  | 7 |
|                                | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3  | 3 |
|                                | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6  |   |
| <b>FISCHER 344 RATS FEMALE</b> |   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |   |
| ANIMAL ID                      |   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |   |
| <b>1000 MG/L</b>               |   | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5  |   |
|                                |   | 6 | 6 | 6 | 6 | 9 | 9 | 0 | 6 | 6 | 7 | 8 | 8 | 8 | 9 | 9 | 0 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |    |   |
|                                |   | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 8 | 9 | 0 | 3 | 6 | 7 | 4 | 5 | 5 | 4 | 5 | 6 | 8 | 9 | 0 | 3 | 4 | 5 |    |   |
| <b>* TOTALS</b>                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Harderian Gland                |   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SYSTEMIC LESIONS**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | 12 |

\*\*\* END OF REPORT \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
x .. Lesion present  
| .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically